Form	<b>990</b>
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#### \*\* PUBLIC DISCLOSURE COPY \*\* **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form990 for instructions and the latest information.



Α	For the	e 2021 calendar year, or tax year beginning JUL 1, 2021 and	lending J	UN 30, 2022			
	Check if applicab	e: C Name of organization		D Employer identific	ation number		
	Addre	ss A Noise Within					
	Name			95-4443878			
	Initial return		Room/suite	E Telephone number			
	Final	3352 Fast Footbill Bouleward	noon, ouno	626-356-3100			
	termir			G Gross receipts \$	5,527,380.		
	Amen return	ded Pagadona CA 91107		H(a) Is this a group ref			
	Applic			for subordinates?			
	pendi	<sup>ng</sup> same as C above		H(b) Are all subordinates inc			
1	Tax-ex	empt status: 🕱 501(c)(3) 🗌 501(c) ( )◀ (insert no.) 🗌 4947(a)(1)	or 527		ist. See instructions		
		te: www.anoisewithin.org		H(c) Group exemption			
		organization: X Corporation Trust Association Other ►	L Year		State of legal domicile: CA		
	art I		•		U.		
	1	Briefly describe the organization's mission or most significant activities: A Nois	e Within	produces classic			
Governance		theatre as an essential means to enrich our community					
nai	2	Check this box      if the organization discontinued its operations or disposed in the organization of the	sed of more	than 25% of its net asse	ets.		
ver	3	Number of voting members of the governing body (Part VI, line 1a)		3	20		
		Number of independent voting members of the governing body (Part VI, line 1b)			18		
s S	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)			174		
/itie	6	Total number of volunteers (estimate if necessary)			60		
Activities &	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.		
<	b	Net unrelated business taxable income from Form 990-T, Part I, line 11			0.		
				Prior Year	Current Year		
đ	8	Contributions and grants (Part VIII, line 1h)	2,421,865.	5. 4,053,258.			
Revenue	9	Program service revenue (Part VIII, line 2g)		124,510.	1,173,578.		
eve	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		346.	12,095.		
Ξ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		160,351.	219,556.		
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,707,072.	5,458,487.		
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.		
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.		
ŝ	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,162,260.	2,014,453.		
nse	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.		
Expenses	b	Total fundraising expenses (Part IX, column (D), line 25)					
Û	i 17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		892,898.	1,836,597.		
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,055,158.	3,851,050.			
	19	Revenue less expenses. Subtract line 18 from line 12		651,914.	1,607,437.		
Net Assets or	E E		Ве	ginning of Current Year	End of Year		
sets	20	Total assets (Part X, line 16)		12,904,846.	13,728,451.		
tAs	21	Total liabilities (Part X, line 26)		1,543,851.	865,651.		
Rei	22	Net assets or fund balances. Subtract line 21 from line 20		11,360,995.	12,862,800.		
P	art II	Signature Block					
Und	der pena	lties of perjury, I declare that I have examined this return, including accompanying schedule	s and stateme	ents, and to the best of my	knowledge and belief, it is		

true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign	Signature of officer			Date											
Here	JULIA RODRIGUEZ-ELLIOTT, Co-Artis	stic Dir.													
	Type or print name and title														
	Print/Type preparer's name	Preparer's signature	Date	Check	PTIN										
Paid	Karen Lo	Karen Lo	06/29/2	3 self-employed	P02141262										
Preparer	Firm's name 🕒 CliftonLarsonAllen LLP			Firm's EIN 🕨 43	1-0746749										
Use Only	Firm's address 🔊 301 North Lake Avenue, S	Suite 900													
	Pasadena, CA 91101			Phone no. (626)	793-3600										
May the I	RS discuss this return with the preparer shown abo	ve? See instructions			X Yes	No									
132001 12-0	D9-21 LHA For Paperwork Reduction Act Notic	ce, see the separate instructions.		132001 12-09-21 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2021)											

See Schedule O for Organization Mission Statement Continuation

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Par	t III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission:		
	A Noise Within produces classic theatre as an essential means to		
	enrich our community by embracing universal human experiences,		
	expanding personal awareness and challenging individual perspectives.		
2	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ?		Yes 🛛 No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?		Yes 🔀 No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as n	• •	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	s, the total expense	es, and
	revenue, if any, for each program service reported.		
4a		le\$1	,010,939.)
	A Noise Within (ANW) is committed to creating opportunities for adult		
	and student audiences in Southern California to connect with classic plays and to providing an artistic home for its company of resident		
	artists. In a typical season, ANW presents over 180 performances of 7		
	classic plays, serving 51,000 patrons (including 18,000 students and		
	teachers). ANW has been recognized with dozens of awards by theatre,		
	arts, and business organizations for the high quality of our		
	productions, entrepreneurialism, and contributions to the civic and		
	cultural life of Pasadena and Los Angeles; our history of achievement		
	prompted the Los Angeles Times to declare ANW "an oasis for those who		
	love classic theatre."		
4b	(Code:) (Expenses \$1,141,343. including grants of \$) (Revenue (Rev	ie \$	150,565.)
	"In a typical season, ANW's Education Program reaches 18,000 students		
	and teachers from nearly 200 schools in 40+ school districts. During		
	the pandemic, our staff and teaching artists were quick to adapt these programs to a distance-learning format. Our Education Program consists		
	of a thoughtfully designed suite of transformational theatre arts		
	learning experiences, including:		
	a. STUDENT MATINEES & EVENING PERFORMANCES		
	Weekday matinee performances for students feature the same professional		
	cast as evening performances. Students enjoy a pre-show introduction, full-length performance, and post-show discussion with the artists		
	(facilitated by our Director of Education). Based on demonstrated need		
4c	(Code:) (Expenses \$20,781. including grants of \$) (Revenue	ie \$	12,074.)
	"ANW's community-driven program, Noise Now, includes readings,		,
	adaptations, multi-genre performances, dance, art installations, and		
	non-traditional theatre presented collaboratively with innovative		
	organizations working in and around Los Angeles. Many of these		
	collaborations serve to either develop or present work that centers		
	communities of color, including projects that reimagine white/western		
	work through a BIPOC lens, projects that explore international		
	mythologies, and projects that bring visibility to displaced and/or		
	systemically oppressed cultures.		
	of color, more patrons under 30, and more low-income patrons than ANW's		
4d			
14	(Expenses \$ including grants of \$ ) (Revenue \$	)	
4e	Total program service expenses > 3,243,822.	/	
		Fo	rm <b>990</b> (2021)
132002	See Schedule O for Continuation(s)		
	2		

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<sup>2021.06000</sup> A NOISE WITHIN

Form	990 (2021) A Noise Within 95-44438	78	Р	age <b>3</b>
Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		x
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	<u> </u>		
Ŭ		5		x
6	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	<b>--</b>		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			x
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	х	
~	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
U		11c		x
<b>ا</b> م	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII			<u> </u>
a	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			x
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	77	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	<u> </u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		x
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
.0	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			<u> </u>
16		1		x
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	<b> </b>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		x
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		x
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
_	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I. Parts I and II	21		x
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132003 12-09-21

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Par	rt IV Checklist of Required Schedules (continued)		-	
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	. 22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		x
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?			
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990 EZ? If "Yes," complete			
	Schedule L, Part I	25b		x
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
с	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	. 29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	. 31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	. 33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1			X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	. <b>35a</b>		x
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	. <u>35b</u>		<b> </b>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			-
	If "Yes," complete Schedule R, Part V, line 2	. 36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
Par	Note: All Form 990 filers are required to complete Schedule O           t V         Statements Regarding Other IRS Filings and Tax Compliance	. 38	Х	L
Fal				
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		
		12	Yes	No
		13		
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
10005	(gambling) winnings to prize winners?	_ <b>1</b> c	990	 (2021)
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Par	TV Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		res	NO
	filed for the calendar year ending with or within the year covered by this return 2a 174			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> . See instructions.			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<u>5</u> a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			Ŧ
	any contributions that were not tax deductible as charitable contributions?	<u>6a</u>		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	<b>a</b> .		
-	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	7-		x
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	_7a ⊳		
	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7b		
С	to file Form 8282?	7c		x
h	If "Yes," indicate the number of Forms 8282 filed during the year 7d	10		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	76 7f		x
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
-	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	12-		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
h	Enter the amount of reserves the organization is required to maintain by the states in which the			
U	organization is licensed to issue qualified health plans			
с	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		х
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	14b		
15 15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		x
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		х
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any			
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			
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Form	990 (2021) A Noise Within			-444387			age <b>6</b>
Pa	t VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 th	nrough	7b below, a	and for a	"No" r	espon	se
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O						
	Check if Schedule O contains a response or note to any line in this Part VI						X
Sec	tion A. Governing Body and Management						
						Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		20			
	If there are material differences in voting rights among members of the governing body, or if the governing						
	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0.						
b	Enter the number of voting members included on line 1a, above, who are independent	1b		18			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with a	any other				
	officer, director, trustee, or key employee?				2	Х	
3	Did the organization delegate control over management duties customarily performed by or under the	direc	t supervisio	n			
	of officers, directors, trustees, or key employees to a management company or other person?				3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 9	90 wa	s filed?		4		X
5	Did the organization become aware during the year of a significant diversion of the organization's ass	ets?			5		X
6	Did the organization have members or stockholders?				6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	point	one or				
	more members of the governing body?				7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st	ockho	lders, or				
	persons other than the governing body?				7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	r by the	e following:				
а	The governing body?				8a	Х	
b	Each committee with authority to act on behalf of the governing body?				8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read	hed a	t the				
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O				9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue	Code.)				
						Yes	No
10a	Did the organization have local chapters, branches, or affiliates?				10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such ch	apters	, affiliates,				
	and branches to ensure their operations are consistent with the organization's exempt purposes?				10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body	befor	e filing the f	orm?	11a	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.						
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13				12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise				12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	'es," d	escribe				
	on Schedule O how this was done				12c	Х	
13	Did the organization have a written whistleblower policy?				13	X	
14	Did the organization have a written document retention and destruction policy?				14		X
15	Did the process for determining compensation of the following persons include a review and approva	l by in	dependent				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?						
а	The organization's CEO, Executive Director, or top management official				15a	X	
b	Other officers or key employees of the organization				15b	X	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangen	nent w	ith a				
	taxable entity during the year?				16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat		=				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	izatior	ı's				
	exempt status with respect to such arrangements?				16b		
Sec	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed CA						
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and	ld 990	-T (section §	501(c)(3)s	only)	availat	ole
	for public inspection. Indicate how you made these available. Check all that apply.						
	X Own website X Another's website X Upon request Other (explain						
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co	nflict c	of interest po	olicy, and	financ	cial	
	statements available to the public during the tax year.						
20	State the name, address, and telephone number of the person who possesses the organization's boo	ks and	d records	▶			
	Katie Witkowski - 626-356-3100						
	3352 E FOOTHILL BLVD, PASADENA, CA 91107					000	
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Form 990 (2021	) A Noise Within	95-4443878	Page 7
Part VII Co	mpensation of Officers, Directors, Trustees, Key Employees, Highest C	compensated	
En	nployees, and Independent Contractors		
Ch	eck if Schedule O contains a response or note to any line in this Part VII		
Section A. Of	ficers, Directors, Trustees, Key Employees, and Highest Compensated Employees		
1a Complete tl	nis table for all persons required to be listed. Report compensation for the calendar year ending	g with or within the organizatior	n's tax year.
	the organization's <b>current</b> officers, directors, trustees (whether individuals or organizations), remns (D), (E), and (F) if no compensation was paid.	egardless of amount of comper	sation.

• List all of the organization's current key employees, if any. See the instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

Name and title         Average boot set of monthement of the area of a structure in the structure boot of the area of a structure in the structure organization         Reportable compensation from related organization         Estimated and organization           (1) Julia Rodriguez-Elliott         40,00         x         x         102         0.         10,915.           (2) Geoff Elliott         40,00         x         x         131,778.         0.         6,786.           (3) Michael Bateman         40,00         x         x         113,206.         0.         0.           (4) William Kennedy         1,00         x         x         0.         0.         0.           (5) Molly Bachmann         1,00         x         x         0.         0.         0.         0.           (6) Onli Bamoel         1,00         x         x         0.         0.         0.         0.           (2) RESTOR         x         x         0.         0.         0.         0.         0.           (2) Molly Bachmann         1,00         x         x         0.         0.         0.         0.           SECERENT         x         x         0.         0.         0.         0.         0.           SECERENT	(A)	(B)			(	C)			(D)	(E)	(F)
hours per weak (ist any hours per verse) is on an weak (ist any hours for related organizations         compensation from the organizations         compensation the organizations         compensation the organizations         amount of the organizations           (1) Julia Rodriguez-Elliott (2) Goeff Elliott         40.00         x         x         134.025         0.         10.9.15;           (2) Goeff Elliott         40.00         x         x         x         131.206         0.         10.9.15;           (3) Michael Bateman         40.00         x         x         x         0.         0.         0.         0.         0.           (4) Millian Rennedy         1.00         x         x         x         0. <td></td> <td></td> <td>(-1-</td> <td></td> <td>Pos</td> <td>itior</td> <td></td> <td></td> <td></td> <td></td> <td></td>			(-1-		Pos	itior					
Week (bistary builts for related organizations bills (1) Julia Rodriguez-Blliott CO-ARTISTIC DIRECTOR         Week (W-2/1099-MISC/ 1099-MESC)         Inon (W-2/1099-MISC/ 1099-MESC)         Compensation organization (W-2/1099-MISC/ 1099-MESC)         Compensation organization (W-2/1099-MISC/ 1099-MESC)         Compensation organization organizations organizations           (1) Julia Rodriguez-Blliott CO-ARTISTIC DIRECTOR         40.00 X         X         X         134,029         0.         10,915.           (2) Geoff Blliott CO-ARTISTIC DIRECTOR         40.00 X         X         X         131,776.         0.         6,776.           (3) Michael Bateman         40.00 MANAGING DIRECTOR         X         X         131,206.         0.         3,947.           (4) Millian Rennedy         1.00 (5) Molly Bachmann         X         X         4         0.         0.         0.           (6) Gail Samuel SCRETRAY         1.000 X         X         X         0.         0.         0.           (10) Malik B, El-Amin DIRECTOR         X         X         0.         0.         0.         0.           (11) Patrick Garcia         1.000 (12) Robert Isreal         X         0.         0.         0.         0.           (12) Robert Isreal         1.000 (12) Malik B, El-Amin DIRECTOR         X         0.         0.         0.        <			box	, unles	ss pe	rson i	s both	n an	-		amount of
(1) Julia Rodriguez-Elliott       40.00       X       X       134,029       0.       10.915.         (2) Geoff Elliott       40.00       X       X       134,029       0.       10.915.         (3) Geoff Elliott       40.00       X       X       131,778.       0.       6.786.         (3) Michael Bateman       40.00       X       X       113,206.       0.       3,947.         (4) William Kennedy       1.00       X       X       0.       0.       0.         (5) Molly Bachmann       1.00       X       X       0.       0.       0.         VICE PRESIDENT       X       X       0.       0.       0.       0.       0.         (6) Gail Samuel       1.00       X       X       0.       0.       0.       0.         (7) Armando Gonzalez       1.00       X       X       0.       0.       0.       0.         DIRECTOR       X       X       0.       0.       0.       0.       0.       0.         (3) Bil Bogard       1.00       X       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0. <t< td=""><td></td><td>week</td><td>offi</td><td>cer an</td><td>ıd a d</td><td>lirecto</td><td>or/trus</td><td>tee)</td><td>from</td><td>from related</td><td>other</td></t<>		week	offi	cer an	ıd a d	lirecto	or/trus	tee)	from	from related	other
(1) Julia Rodriguez-Elliott       40.00       X       X       134,029       0.       10.915.         (2) Geoff Elliott       40.00       X       X       134,029       0.       10.915.         (3) Geoff Elliott       40.00       X       X       131,778.       0.       6.786.         (3) Michael Bateman       40.00       X       X       113,206.       0.       3,947.         (4) William Kennedy       1.00       X       X       0.       0.       0.         (5) Molly Bachmann       1.00       X       X       0.       0.       0.         VICE PRESIDENT       X       X       0.       0.       0.       0.       0.         (6) Gail Samuel       1.00       X       X       0.       0.       0.       0.         (7) Armando Gonzalez       1.00       X       X       0.       0.       0.       0.         DIRECTOR       X       X       0.       0.       0.       0.       0.       0.         (3) Bil Bogard       1.00       X       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0. <t< td=""><td></td><td>(list any</td><td>ector</td><td></td><td></td><td></td><td></td><td></td><td>the</td><td>organizations</td><td>compensation</td></t<>		(list any	ector						the	organizations	compensation
(1) Julia Rodriguez-Elliott       40.00       X       X       134,029       0.       10.915.         (2) Geoff Elliott       40.00       X       X       134,029       0.       10.915.         (3) Geoff Elliott       40.00       X       X       131,778.       0.       6.786.         (3) Michael Bateman       40.00       X       X       113,206.       0.       3,947.         (4) William Kennedy       1.00       X       X       0.       0.       0.         (5) Molly Bachmann       1.00       X       X       0.       0.       0.         VICE PRESIDENT       X       X       0.       0.       0.       0.       0.         (6) Gail Samuel       1.00       X       X       0.       0.       0.       0.         (7) Armando Gonzalez       1.00       X       X       0.       0.       0.       0.         DIRECTOR       X       X       0.       0.       0.       0.       0.       0.         (3) Bil Bogard       1.00       X       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0. <t< td=""><td></td><td>hours for</td><td>r dire</td><td></td><td></td><td></td><td>fed</td><td></td><td>organization</td><td>(W-2/1099-MISC/</td><td>from the</td></t<>		hours for	r dire				fed		organization	(W-2/1099-MISC/	from the
(1) Julia Rodriguez-Elliott       40.00       X       X       134,029       0.       10.915.         (2) Geoff Elliott       40.00       X       X       134,029       0.       10.915.         (3) Geoff Elliott       40.00       X       X       131,778.       0.       6.786.         (3) Michael Bateman       40.00       X       X       113,206.       0.       3,947.         (4) William Kennedy       1.00       X       X       0.       0.       0.         (5) Molly Bachmann       1.00       X       X       0.       0.       0.         VICE PRESIDENT       X       X       0.       0.       0.       0.       0.         (6) Gail Samuel       1.00       X       X       0.       0.       0.       0.         (7) Armando Gonzalez       1.00       X       X       0.       0.       0.       0.         DIRECTOR       X       X       0.       0.       0.       0.       0.       0.         (3) Bil Bogard       1.00       X       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0. <t< td=""><td></td><td>related</td><td>tee o</td><td>ustee</td><td></td><td></td><td>ensat</td><td></td><td></td><td>1099-NEC)</td><td>organization</td></t<>		related	tee o	ustee			ensat			1099-NEC)	organization
(1) Julia Rodriguez-Elliott       40.00       X       X       134,029       0.       10.915.         (2) Geoff Elliott       40.00       X       X       134,029       0.       10.915.         (3) Geoff Elliott       40.00       X       X       131,778.       0.       6.786.         (3) Michael Bateman       40.00       X       X       113,206.       0.       3,947.         (4) William Kennedy       1.00       X       X       0.       0.       0.         (5) Molly Bachmann       1.00       X       X       0.       0.       0.         VICE PRESIDENT       X       X       0.       0.       0.       0.       0.         (6) Gail Samuel       1.00       X       X       0.       0.       0.       0.         (7) Armando Gonzalez       1.00       X       X       0.       0.       0.       0.         DIRECTOR       X       X       0.       0.       0.       0.       0.       0.         (3) Bil Bogard       1.00       X       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0. <t< td=""><td></td><td>organizations</td><td>ll trus</td><td>nal tr</td><td></td><td>loyee</td><td>d mo</td><td></td><td>1099-NEC)</td><td></td><td>and related</td></t<>		organizations	ll trus	nal tr		loyee	d mo		1099-NEC)		and related
(1) Julia Rodriguez-Elliott       40.00       X       X       134,029       0.       10.915.         (2) Geoff Elliott       40.00       X       X       134,029       0.       10.915.         (3) Geoff Elliott       40.00       X       X       131,778.       0.       6.786.         (3) Michael Bateman       40.00       X       X       113,206.       0.       3,947.         (4) William Kennedy       1.00       X       X       0.       0.       0.         (5) Molly Bachmann       1.00       X       X       0.       0.       0.         VICE PRESIDENT       X       X       0.       0.       0.       0.       0.         (6) Gail Samuel       1.00       X       X       0.       0.       0.       0.         (7) Armando Gonzalez       1.00       X       X       0.       0.       0.       0.         DIRECTOR       X       X       0.       0.       0.       0.       0.       0.         (3) Bil Bogard       1.00       X       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0. <t< td=""><td></td><td></td><td>dividua</td><td>stitutio</td><td>ficer</td><td>y em p</td><td>ghest o</td><td>rmer</td><td></td><td></td><td>organizations</td></t<>			dividua	stitutio	ficer	y em p	ghest o	rmer			organizations
CO-ARTISTIC DIRECTOR         X         X         X         134,029.         0.         10,915.           (2) Geoff Elliott         40,00         x         x         131,778.         0.         6,786.           (3) Michael Bateman         40,00         x         x         113,206.         0.         3,947.           (4) William Kennedy         1.00         x         x         0.         0.         0.           PRSIDENT         x         x         0.         0.         0.         0.           (5) Molly Bachmann         1.00         x         x         0.         0.         0.           SECRETARY         x         x         0.         0.         0.         0.         0.           SECRETARY         x         x         0.         0.         0.         0.         0.           (7) Armando Gonzalez         1.00         x         0.         0.         0.         0.           (9) Susan Toler Carr         1.00         x         0.         0.         0.         0.           DIRECTOR         x         0.         0.         0.         0.         0.         0.           (10) Maitk B. El-Min         1.000<	(1) Julia Rodriguez-Elliott	,	Ē	Ë	0f	Ϋ́e	토등	9			
(2) Geoff Elliott       40.00       x       x       131,778.       0.       6,786.         (3) Michael Bateman       40.00       x       113,206.       0.       3,947.         (4) William Kennedy       1.00       x       113,206.       0.       3,947.         (4) William Kennedy       1.00       x       0.       0.       0.         (5) Molly Bachmann       1.00       x       0.       0.       0.         (6) Gail Samuel       1.00       x       0.       0.       0.         (7) Armando Gonzalez       1.00       x       0.       0.       0.         (7) Armando Gonzalez       1.00       x       0.       0.       0.         (9) Susan Toler Carr       1.00       x       0.       0.       0.         (10) Malik B. El-Amin       1.00       x       0.       0.       0.         DIRECTOR       x       0.       0.       0.       0.       0.         (11) Patrick Garcia       1.00       x       0.       0.       0.       0.         DIRECTOR       x       0.       0.       0.       0.       0.       0.         (12) Robert Isreal       1.0	_		x		x				134,029.	0.	10,915.
Michael Bateman         40.00         x         113,206.         0.         3,947.           MANAGING DIRECTOR         1.00         x         x         0.         0.         3,947.           PRESIDENT         x         x         x         0.         0.         0.           VICE PRESIDENT         x         x         x         0.         0.         0.           VICE PRESIDENT         x         x         0.         0.         0.         0.           SECERTARY         x         x         0.         0.         0.         0.           (7) Armando Gonzalez         1.00         x         x         0.         0.         0.           Treasurer         x         x         0.         0.         0.         0.         0.           DIRECTOR         x          0.         0.         0.         0.         0.           DIRECTOR         x          0.	(2) Geoff Elliott	40.00							,		<i>,</i>
MANAGING DIRECTOR         X         113,206.         0. $3,947.$ (4) William Kennedy         1.00         X         X         0.         0.         0.           PRESIDENT         X         X         0.         0.         0.         0.           (5) Molly Bachmann         1.00         X         X         0.         0.         0.           (6) Gail Samuel         1.00         X         X         0.         0.         0.           (7) Armando Gonzalez         1.00         X         X         0.         0.         0.           (8) Bill Bogaard         1.00         X         X         0.         0.         0.           DIRECTOR         X         X         0.         0.         0.         0.           (10) Malik B. El-Amin         1.00         X         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.         0.           UILECTOR         X         0.         0.         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.         0.           UILECTOR	CO-ARTISTIC DIRECTOR		х		х				131,778.	0.	6,786.
(4) Willian Kennedy       1.00       x       x       x       0.       0.       0.         (5) Molly Bachmann       1.00       x       x       x       0.       0.       0.         (5) Molly Bachmann       1.00       x       x       x       0.       0.       0.         (6) Gail Samuel       1.00       x       x       x       0.       0.       0.         SECRETARY       x       x       0.       0.       0.       0.       0.         (7) Armando Gonzalez       1.00       x       x       0.       0.       0.       0.         Treasurer       x       x       0.       0.       0.       0.       0.       0.         (9) Susan Toler Carr       1.00       x       0.	(3) Michael Bateman	40.00									
PRESIDENT         X         X         X         X         0.         0.         0.           (5) Molly Bachmann         1.00         X         X         0.         0.         0.           VICE PRESIDENT         X         X         0.         0.         0.         0.           SECRETARY         X         X         0.         0.         0.         0.           SECRETARY         X         X         0.         0.         0.         0.           Treasurer         X         X         0.         0.         0.         0.           OIRECTOR         X         X         0.         0.         0.         0.           ILIO PRECTOR         X         X         0.         0.         0.         0.           ILIO PRECTOR					х				113,206.	0.	3,947.
(5) Molly Bachmann       1.00       x       x       0.       0.       0.         VICE PRESIDENT       x       x       x       0.       0.       0.       0.         (6) Gail Samuel       1.00       x       x       x       0.       0.       0.         SECRETARY       x       x       0.       0.       0.       0.       0.         Treasurer       x       x       x       0.       0.       0.       0.         ORGENETOR       x       x       0.       0.       0.       0.       0.         DIRECTOR       x       0.       0.       0.       0.       0.       0.         DIRECTOR       x       0.       0.       0.       0.       0.       0.         DIRECTOR       x       0.       0.       0.       0.       0.       0.       0.         DIRECTOR       x       0.		1.00									
VICE PRESIDENT         X         X         X         X         0.         0.         0.           (6) Gail Samuel         1.00         X         X         X         0.         0.         0.           SECEPTARY         X         X         X         0.         0.         0.         0.           (7) Armando Gonzalez         1.00         X         X         0.         0.         0.           Treasurer         X         X         0.         0.         0.         0.           DIRECTOR         X         X         0.         0.         0.         0.           9) Susan Toler Carr         1.00         X         0.         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.         0.         0.           (11) Patrick Garcia         1.00         X         0.         0.         0.         0.         0.         0.         0.         0.			Х		х				0.	0.	0.
(6) Gail Samuel       1.00       x       x       x       0.       0.       0.         SECRETARY       x       x       x       x       0.       0.       0.         (7) Armando Gonzalez       1.00       x       x       x       0.       0.       0.         Treasurer       x       x       x       0.       0.       0.       0.         (8) Bill Bogaard       1.00       x       0.       0.       0.       0.         DIRECTOR       x       0.       0.       0.       0.       0.         (9) Susan Toler Carr       1.00       x       0.       0.       0.       0.         DIRECTOR       x       0.       0.       0.       0.       0.       0.         (10) Malik B. El-Amin       1.00       x       0.       0.       0.       0.       0.         DIRECTOR       x       0.       0.       0.       0.       0.       0.       0.         (12) Robert Isreal       1.00       X       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.	_	1.00									
SECRETARY         X         X         X         X         X         0.         0.         0.           (7) Armando Gonzalez         1.00         X         X         X         0.         0.         0.           Treasurer         X         X         X         0.         0.         0.         0.           Bill Bogard         1.00         X         X         0.         0.         0.         0.           DIRECTOR         X         X         0.         0.         0.         0.         0.           (9) Susan Toler Carr         1.00         X         0.         0.         0.         0.         0.         0.           DIRECTOR         X         0         0.			Х		Х				0.	0.	0.
(7) Armando Gonzalez       1.00       X       X       X       0.       0.       0.         Treasurer       X       X       X       0.       0.       0.       0.         (8) Bill Bogaard       1.00       X       X       0.       0.       0.       0.         DIRECTOR       X       X       0.       0.       0.       0.       0.         (9) Susan Toler Carr       1.00       X       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.       0.         DIRECTOR       X       0.       <		1.00									
Treasurer     X     X     X     X     0.     0.       (8) Bill Bogard     1.00     X     0.     0.     0.       DIRECTOR     X     0.     0.     0.     0.       (9) Susan Toler Carr     1.00     X     0.     0.     0.       DIRECTOR     X     0.     0.     0.     0.       (10) Malik B. El-Amin     1.00     X     0.     0.     0.       DIRECTOR     X     0.     0.     0.     0.       (11) Patrick Garcia     1.00     X     0.     0.     0.       DIRECTOR     X     0.     0.     0.     0.       (12) Robert Isreal     1.00     X     0.     0.     0.       DIRECTOR     X     0.     0.     0.     0.       (13) Denise Jay     1.00     X     0.     0.     0.       DIRECTOR     X     0.     0.     0.     0.       (14) Veralyn Jones     1.00     X     0.     0.     0.       DIRECTOR     X     0.     0.     0.     0.       (15) Jay Lesiger     1.00     X     0.     0.     0.       DIRECTOR     X     0.     0.			Х		Х				0.	0.	0.
(8) Bill Bogard       1.00       x       0.       0.       0.         DIRECTOR       x       0.       0.       0.       0.         (9) Susan Toler Carr       1.00       x       0.       0.       0.         DIRECTOR       x       0.       0.       0.       0.         (10) Malik B. El-Amin       1.00       x       0.       0.       0.         DIRECTOR       x       0.       0.       0.       0.         (11) Malik B. El-Amin       1.00       x       0.       0.       0.         DIRECTOR       x       0.       0.       0.       0.       0.         (11) Patrick Garcia       1.00       x       0.       0.       0.       0.         DIRECTOR       x       0.       0.       0.       0.       0.       0.         DIRECTOR       x       0.	( , ,	1.00									
DIRECTOR         x         x         0         0.			Х		Х				0.	0.	0.
(9) Susan Toler Carr       1.00       X       0       0.       0.         DIRECTOR       1.00       X       0.       0.       0.         (10) Malik B. El-Amin       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.         (11) Patrick Garcia       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.         (12) Robert Isreal       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.         (13) Denise Jay       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.         (14) Veralyn Jones       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.         (16) Julie Markowitz       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.         (17) Terri Murray       1.00       X       0.	_	1.00									
DIRECTOR         X         X         0         0.			X						0.	0.	0.
(10) Malik B. El-Amin         1.00         x         0         0. </td <td></td> <td>1.00</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>_</td>		1.00									_
DIRECTOR         X         X         0. <th< td=""><td></td><td></td><td>Х</td><td></td><td></td><td></td><td></td><td></td><td>0.</td><td>0.</td><td>0.</td></th<>			Х						0.	0.	0.
(11) Patrick Garcia       1.00       x       0       0.       0.       0.         DIRECTOR       x       1.00       x       0.       0.       0.       0.         (12) Robert Isreal       1.00       x       0.       0.       0.       0.       0.         DIRECTOR       x       0       0.       0.       0.       0.       0.         (13) Denise Jay       1.00       x       0       0.       0.       0.       0.         DIRECTOR       x       0       0.       0.       0.       0.       0.       0.         (14) Veralyn Jones       1.00       x       0       0.       0.       0.       0.         DIRECTOR       X       0       0.       0.       0.       0.       0.       0.         (15) Jay Lesiger       1.00       X       0       0.       0.       0.       0.       0.         DIRECTOR       X       0       0.       0.       0.       0.       0.       0.         (16) Julie Markowitz       1.00       X       0       0.       0.       0.       0.         DIRECTOR       X       0		1.00									
DIRECTOR         x         x         0         0.			Х						0.	0.	0.
(12) Robert Isreal       1.00       X       0       0.       0.       0.         DIRECTOR       X       1.00       X       0.       0.       0.       0.         (13) Denise Jay       1.00       X       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         (14) Veralyn Jones       1.00       X       0       0.       0.       0.       0.         DIRECTOR       1.00       X       0       0.       0.       0.       0.         (15) Jay Lesiger       1.00       X       0       0.       0.       0.       0.         DIRECTOR       X       0       0.       0.       0.       0.       0.       0.         (16) Julie Markowitz       1.00       X       0       0.       0.       0.       0.       0.       0.         DIRECTOR       X       0       0.       0.       0.       0.       0.       0.       0.         DIRECTOR       X       0       0       0       0       0.       0.       0.       0.       0.       0.		1.00									
DIRECTOR         X         0         0. <th< td=""><td></td><td></td><td>X</td><td></td><td></td><td></td><td></td><td></td><td>0.</td><td>0.</td><td>0.</td></th<>			X						0.	0.	0.
(13) Denise Jay       1.00       X       0       0. </td <td>(12) Robert Isreal</td> <td>1.00</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	(12) Robert Isreal	1.00									
DIRECTOR     X     0     0.     0.     0.       (14) Veralyn Jones     1.00     X     0     0.     0.       DIRECTOR     X     0     0.     0.     0.       (15) Jay Lesiger     1.00     X     0.     0.     0.       DIRECTOR     X     0     0.     0.     0.       (16) Julie Markowitz     1.00     X     0.     0.     0.       DIRECTOR     X     0     0.     0.     0.       (16) Julie Markowitz     1.00     X     0.     0.     0.       DIRECTOR     X     0     0.     0.     0.       DIRECTOR     X     0     0.     0.     0.			Х						0.	0.	0.
(14) Veralyn Jones       1.00       x       0       0.       0	(13) Denise Jay	1.00									
DIRECTOR         X         0         0. <th< td=""><td></td><td></td><td>Х</td><td></td><td></td><td></td><td></td><td></td><td>0.</td><td>0.</td><td>0.</td></th<>			Х						0.	0.	0.
(15) Jay Lesiger     1.00     X     0.     0.       DIRECTOR     X     0.     0.     0.       (16) Julie Markowitz     1.00     0.     0.     0.       DIRECTOR     X     0.     0.     0.       (17) Terri Murray     1.00     0.     0.     0.       DIRECTOR     X     0.     0.     0.	-	1.00									
DIRECTOR         X         0         0. <th< td=""><td></td><td></td><td>Х</td><td></td><td></td><td></td><td></td><td></td><td>0.</td><td>0.</td><td>0.</td></th<>			Х						0.	0.	0.
(16) Julie Markowitz         1.00         X         0. </td <td></td> <td>1.00</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>		1.00									
DIRECTOR         X         0. </td <td></td> <td></td> <td>Х</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>0.</td> <td>0.</td> <td>0.</td>			Х						0.	0.	0.
(17) Terri Murray         1.00         0. <td></td> <td>1.00</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>		1.00									
DIRECTOR X 0. 0. 0.			х						0.	0.	0.
	-	1.00									
	DIRECTOR		Х						0.	0.	

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132007 12-09-21

Form 990 (2021)

Form 990 (2021) A Noise Withi	ln								95-444	.3878	3	Pa	age <b>8</b>
Part VII Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	and	d Hig	ghes	t C	ompensated Employee	s (continued)				
(A) Name and title	<b>(B)</b> Average hours per week	(do box	not c , unle:	(C Pos heck ss per	C) itior <sup>more</sup> rson i		one 1 an	<b>(D)</b> Reportable compensation from	(E) Reportable compensation from related	۱	an	(F) stimate nount other	
	(list any hours for related organizations below line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MIS( 1099-NEC)		fr org and	pensa rom the anizat d relate anizatio	e ion ed
(18) Cynthia Nunes DIRECTOR	1.00	x						0.		٥.			0.
(19) Richard Roberts DIRECTOR	1.00	x						0.		٥.			0.
(20) Randi Tahara DIRECTOR	1.00	x						0.		٥.			0.
(21) Shivani Thakkar DIRECTOR	1.00	x						0.		٥.			0.
		-											
		-											
1b Subtotal								379,013.		0.		21,	648.
c Total from continuation sheets to Part VI d Total (add lines 1b and 1c)	I, Section A							0.		0.			0. 648.
2 Total number of individuals (including but n compensation from the organization ►							o re		000 of reportable			,	3
3 Did the organization list any former officer,	director. trust	ee. k	kev e	empl	ove	e. or	hia	hest compensated empl	ovee on			Yes	No
line 1a? If "Yes," complete Schedule J for se 4 For any individual listed on line 1a, is the su	uch individual								·····		3		x
and related organizations greater than \$150 5 Did any person listed on line 1a receive or a	),000? If "Yes,	" со	mple	ete S	Sche	edule	e J f	for such individual			4		x
rendered to the organization? <i>If "Yes." com</i> Section B. Independent Contractors											5		X
Complete this table for your five highest contractors     the organization. Report compensation for t	•	•							· ·	ensat	ion fro	m	
(A) Name and business		NO		ig w				(B) Description of s		C	( <b>C</b> ompe	<b>C)</b> nsatio	 n
2 Total number of independent contractors (ir \$100,000 of compensation from the organiz	•	ot lir	niteo	d to		se lis 0	ted	above) who received mo	ore than		<b></b>	<b>990</b> (;	0001
											⊢orm	330 (2	2021)

	t VII	Statement of Re	venue	•						
		Check if Schedule O o	contain	s a resp	onse	or note to any line	e in this Part VIII			
							<b>(A)</b> Total revenue	(B) Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	(D) Revenue excluc from tax unde sections 512 - 5
ŝ	1 a	Federated campaigns		1a						
iun		Membership dues								
e M		Fundraising events								
ar A		Related organizations								
Ĩ		Government grants (contr				1,518,850.				
5	f	All other contributions, gifts,	grants, a	and						
the		similar amounts not included	above	1f		2,534,408.				
and Other Similar Amounts	g	Noncash contributions included in	lines 1a-1	f <b>1g</b>	\$	3,806.				
an	h	Total. Add lines 1a-1f					4,053,258.			
						Business Code				
	2 a	Ticket Sales				711110	1,023,013.	<u> </u>		
P	b	Educational Program	S			611710	150,565.	150,565.		
/ent	c									
Kevenue	d									
]	e									
		All other program service					1,173,578.			
+	<u>g</u> 3	Total. Add lines 2a-2f Investment income (includ					-,,5,570.			
	3	other similar amounts)	•				12,095.			12,0
	4	Income from investment of					,			,-
	5	Royalties				· · ·				
	Ū			(i) Rea	al	(ii) Personal				
	6 a	Gross rents	6a							
		Less: rental expenses	6b							
		Rental income or (loss)	6c							
		Net rental income or (loss)	)			►				
	7 a	Gross amount from sales of		i) Securi		(ii) Other				
		assets other than inventory	7a							
	b	Less: cost or other basis								
		and sales expenses	7b							
	с	Gain or (loss)	7c							
		Net gain or (loss)				····· ►				
	8 a	Gross income from fundraising	ng event	s (not						
		including \$								
		contributions reported on			_	270.000				
	-	Part IV, line 18								
		Less: direct expenses				68,893.	209,373.			209,3
		Net income or (loss) from				▶	203,313.			209,3
	эa	Gross income from gamin								
	h	Part IV, line 19								
		Net income or (loss) from								
		Gross sales of inventory, I			<u> </u>					
		and allowances			10a					
	b	Less: cost of goods sold								
		Net income or (loss) from								
						Business Code				
a	11 a	Other Income				900009	10,183.			10,18
Shu(	b									
Kevenue	с									
r	d	All other revenue								
		Total. Add lines 11a-11d					10,183.			
	12	Total revenue. See instruction	ons				5,458,487.	1,173,578.	0.	231,65

A Noise Within

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Do not include amounts reported on I 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1 Grants and other assistance to dome	estic organizations		·		·
and domestic governments. See Par	t IV, line 21 📖 📃				
2 Grants and other assistance to c					
individuals. See Part IV, line 22					
<b>3</b> Grants and other assistance to f	oreign				
organizations, foreign governme	, ,				
individuals. See Part IV, lines 15					
4 Benefits paid to or for members					
5 Compensation of current officer	s, directors,				
	·····	367,666.	285,047.	59,651.	22,968
6 Compensation not included above to	· ·				
persons (as defined under section 4	()())				
persons described in section 4958(c					
7 Other salaries and wages		1,305,496.	1,045,634.	49,611.	210,251.
8 Pension plan accruals and contributi	`				_
section 401(k) and 403(b) employer	· · ·	41,279.	40,462.		817.
9 Other employee benefits		125,060.	107,192.	10,601.	7,267.
10 Payroll taxes		174,952.	147,593.	8,032.	19,327.
<b>11</b> Fees for services (nonemployees	s):				
a Management					
<b>b</b> Legal					
<b>c</b> Accounting		82,340.		82,340.	
<b>d</b> Lobbying					
e Professional fundraising services. Se					
f Investment management fees					
g Other. (If line 11g amount exceeds	10% of line 25,				
column (A), amount, list line 11g ex		123,178.	110,860.	12,318.	
<b>12</b> Advertising and promotion		278,076.	269,887.	851.	7,338.
13 Office expenses		101,637.	74,195.	19,990.	7,452.
14 Information technology	·····	42,396.	38,156.	4,240.	
15 Royalties		55,367.	55,367.		
16 Occupancy		113,636.	102,272.	11,364.	
17 Travel					
<b>18</b> Payments of travel or entertainm	nent expenses				
for any federal, state, or local pu					
19 Conferences, conventions, and	meetings				
20 Interest		14,856.	13,370.	1,486.	
21 Payments to affiliates					
22 Depreciation, depletion, and am	ortization	365,080.	328,572.	36,508.	
23 Insurance		118,334.	106,501.	11,833.	
24 Other expenses. Itemize expenses no above. (List miscellaneous expenses line 24e amount exceeds 10% of line amount list line 24e avagages of Se	s on line 24e. If e 25, column (A),				
amount, list line 24e expenses on So a Artistic and Technical		251,799.	251,799.		
· Durdurtin Gunnlin		120,502.	120,502.		
c Repairs and Maintenance	<b> </b>	82,366.	74,129.	8,237.	
		73,731.	58,985.	7,373.	7,373,
<b>G</b>	<b> </b>	13,299.	13,299.	,,,,,,	,,,,,,,
e All other expenses 25 Total functional expenses. Add line	as 1 through 24g	3,851,050.	3,243,822.	324,435.	282,793
<ul> <li>25 Total functional expenses. Add line</li> <li>26 Joint costs. Complete this line only</li> </ul>		5,001,000.	5,215,022.	521,155.	
reported in column (B) joint costs fr	° I				
educational campaign and fundraisir					
	3-2 (ASC 958-720)				

132010 12-09-21

Form **990** (2021)

Form 990 (2021)

Liabilities

Net Assets or Fund Balances

# 11

Pa	rt X	Balance Sheet	
		Check if Schedule O contains a response or note to any line in this Part X	
			<b>(A)</b> Beginning of year
	1	Cash - non-interest-bearing	1,682,780.
	2	Savings and temporary cash investments	
	3	Pledges and grants receivable, net	212,263.
	4	Accounts receivable, net	241,257.
	5	Loans and other receivables from any current or former officer, director,	
		trustee, key employee, creator or founder, substantial contributor, or 35%	
		controlled entity or family member of any of these persons	
	6	Loans and other receivables from other disqualified persons (as defined	
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	
ŝ	7	Notes and loans receivable, net	
Assets	8	Inventories for sale or use	
Åŝ	9	Prepaid expenses and deferred charges	18,913.
	10a	Land buildings and equipment: cost or other	

1	Cash - non-interest-bearing			1,002,700.	1	1,000,404.
2	Savings and temporary cash investments				2	
	Pledges and grants receivable, net			212,263.	3	63,629.
	Accounts receivable, net			241,257.	4	5,102.
	Loans and other receivables from any current or					
	trustee, key employee, creator or founder, subsi					
	controlled entity or family member of any of the				5	
		-				
	Loans and other receivables from other disquali	-			~	
	under section 4958(f)(1)), and persons described				6 7	
	Notes and loans receivable, net				-	
	Inventories for sale or use			10 012	8	22,402
				18,913.	9	32,492.
	Land, buildings, and equipment: cost or other					
	basis. Complete Part VI of Schedule D		13,478,180.			
b	Less: accumulated depreciation	10b	3,323,254.	10,375,983.	10c	10,154,926.
	Investments - publicly traded securities				11	
	Investments - other securities. See Part IV, line -	11			12	2,104,473.
	Investments - program-related. See Part IV, line	11			13	
	Intangible assets				14	
	Other assets. See Part IV, line 11			373,650.	15	359,345
	Total assets. Add lines 1 through 15 (must equ			12,904,846.	16	13,728,451,
	Accounts payable and accrued expenses			47,944.	17	129,961.
	Grants payable				18	
	Deferred revenue			401,171.	19	273,688
	<b>-</b>			/ -	20	, ,
	Escrow or custodial account liability. Complete				21	
	Loans and other payables to any current or form				21	
	trustee, key employee, creator or founder, subst					
	controlled entity or family member of any of the	-		227 247	22	
	Secured mortgages and notes payable to unrela	•		327,347.	23	100 657
	Unsecured notes and loans payable to unrelated	-		393,739.	24	102,657
	Other liabilities (including federal income tax, pa	-				
	parties, and other liabilities not included on lines	s 17-24). Com	nplete Part X			
	of Schedule D			373,650.	25	359,345
				1,543,851.	26	865,651
	Organizations that follow FASB ASC 958, che	eck here 🕨	X			
	and complete lines 27, 28, 32, and 33.					
	Net assets without donor restrictions			11,047,984.	27	11,879,228
	Net assets with donor restrictions			313,011.	28	983,572
	Organizations that do not follow FASB ASC 9					
	and complete lines 29 through 33.					
	Capital stock or trust principal, or current funds				29	
	Paid-in or capital surplus, or land, building, or ed				30	
	Retained earnings, endowment, accumulated in				31	
	Total net assets or fund balances			11,360,995.	32	12,862,800
	Total liabilities and net assets/fund balances			12,904,846.	33	13,728,451
	TOTAL HADINGES AND HEL ASSELS/TUNU DAIANCES			12,501,010.	აა	Form <b>990</b> (2021

1

**(B)** End of year

1,008,484.

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Form	1990 (2021) A Noise Within	95-4443878	}	Pad	<sub>ge</sub> 12
	rt XI Reconciliation of Net Assets				<i>.</i>
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>		
1	Total revenue (must equal Part VIII, column (A), line 12)	1	5,	458,	487.
2	Total expenses (must equal Part IX, column (A), line 25)	2	З,	851,	050.
3	Revenue less expenses. Subtract line 2 from line 1	3	1,	607,	437.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	11,	360,	995.
5	Net unrealized gains (losses) on investments	5	-	105,	632.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	12,	862,	800.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
		_		Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	0.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a 🛛			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing	gle Audit			
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
				agn .	(a a a 4)

Form **990** (2021)

(Form 990)

#### **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

OMB No. 1545-0047
2021
Open to Public

							Open to Public Inspection			
Nan	ne of t	the organizati		Employer identification r				identification number		
		Ū		se Within						95-4443878
Pa	rt I	Reason	for Public (	Charity Status.	(All organizations must c	omplete th	his part.) S	ee instructior	IS.	
The	organ				For lines 1 through 12, c					
1			•	•	on of churches described			1)(A)(i).		
2	$\square$				Attach Schedule E (Forn			N NI		
3					anization described in s		)(b)(1)(A)(ii	ii).		
4			•		njunction with a hospital				)(iii). Enter	the hospital's name,
		city, and stat	e:							
5		An organizati	ion operated fo	or the benefit of a co	llege or university owned	l or operat	ed by a go	overnmental u	nit describe	ed in
		section 170	(b)(1)(A)(iv). (0	Complete Part II.)						
6		A federal, sta	ite, or local go	vernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).		
7					ntial part of its support fi				ne general p	oublic described in
				complete Part II.)		Ū			<b>U</b> .	
8					(1)(A)(vi). (Complete Par	t II.)				
9		An agricultur	al research org	ganization described	in section 170(b)(1)(A)(	ix) operate	ed in conju	unction with a	land-grant	college
					ulture (see instructions).					
		university:								
10	X	An organizati	ion that norma	ally receives (1) more	than 33 1/3% of its supp	ort from c	ontribution	ns, membersh	nip fees, and	d gross receipts from
		activities rela	ted to its exen	npt functions, subjec	t to certain exceptions; a	and (2) no	more than	33 1/3% of it	s support f	rom gross investment
		income and ι	unrelated busir	ness taxable income	(less section 511 tax) fro	m busines	sses acqui	red by the org	ganization a	after June 30, 1975.
		See section	<b>509(a)(2).</b> (Co	mplete Part III.)						
11		An organizati	ion organized a	and operated exclusi	ively to test for public sa	fety. See	section 50	09(a)(4).		
12		An organizati	ion organized a	and operated exclusi	ively for the benefit of, to	perform t	he functio	ns of, or to ca	rry out the	purposes of one or
		more publicly	/ supported or	ganizations describe	d in <b>section 509(a)(1)</b> c	r section	509(a)(2).	See section	<b>509(a)(3).</b> (	Check the box on
		_lines 12a thro	ough 12d that	describes the type o	f supporting organizatior	n and com	plete lines	12e, 12f, and	l 12g.	
а		<b>Type I.</b> A s	upporting orga	anization operated, s	upervised, or controlled	by its supp	ported org	anization(s), t	ypically by	giving
		the suppor	ted organizatio	on(s) the power to re	gularly appoint or elect a	majority c	of the direc	ctors or truste	es of the su	upporting
		organizatio	n. You must o	complete Part IV, Se	ections A and B.					
b		<b>Type II.</b> A s	supporting org	anization supervised	or controlled in connect	tion with it	s supporte	ed organizatio	n(s), by hav	ving
		control or r	nanagement o	of the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or mana	ge the supp	ported
		organizatio	n(s). <b>You mus</b>	st complete Part IV,	Sections A and C.					
С		_ Type III fur	nctionally inte	grated. A supportin	g organization operated	in connect	tion with, a	and functiona	lly integrate	ed with,
		_ its support	ed organizatio	n(s) (see instructions	). You must complete I	Part IV, Se	ections A,	D, and E.		
d			-		porting organization oper				-	
					ation generally must sat				an attentiv	/eness
		- ·		,	nplete Part IV, Sections					
е			•		written determination fro			Туре I, Туре	II, Type III	
					nally integrated supporti	ng organiz	ation.			
f		er the number		0						
g		vide the follow (i) Name of supp		n about the supporte (ii) EIN	d organization(s).	(iv) Is the org	anization listed	(v) Amount o	fmonetany	(vi) Amount of other
	,	organizatior		(1) 2.11	(described on lines 1-10		ing document?	support (see i		support (see instructions)
		0			above (see instructions))	Yes	No		,	

Sec	tion A. Public Support	noted below, plea	•	,			
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
	Public support. Subtract line 5 from line 4.						
	ction B. Total Support		[		1	1	
	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,		,	· · · · · · · · ·			
13	<b>First 5 years.</b> If the Form 990 is for th	•			-		
Sec	organization, check this box and stor ction C. Computation of Publi						
	Public support percentage for 2021 (li		•	column (f))		14	%
	Public support percentage from 2020					15	<u> </u>
	<b>33 1/3% support test - 2021.</b> If the c					· · · · ·	
	stop here. The organization qualifies						
b	33 1/3% support test - 2020. If the c						
	and stop here. The organization qual	ifies as a publicly s	supported organization	ation			
17a	10% -facts-and-circumstances test						
	and if the organization meets the facts	s-and-circumstanc	es test, check this	box and stop he	<b>re.</b> Explain in Part	VI how the organiz	zation
	meets the facts-and-circumstances te	st. The organizatic	on qualifies as a pu	blicly supported o	organization	-	
b	10% -facts-and-circumstances test	-			•		
	more, and if the organization meets th	e facts-and-circun	nstances test, che	ck this box and <b>s</b>	<b>top here.</b> Explain i	n Part VI how the	
	organization meets the facts-and-circu	umstances test. Th	ne organization qua	alifies as a publicly	v supported organi	zation	
18	Private foundation. If the organizatio	n did not check a	box on line 13, 16	a, 16b, 17a, or 17t	o, check this box a	nd see instruction	s ►

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A Noise Within

Schedule A (Form 990) 2021 A 1

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

#### Section A. Public Support Calendar year (or fiscal year beginning in) 🕨 (a) 2017 (b) 2018 (c) 2019 (d) 2020 (e) 2021 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not 1,379,081 1,526,970 1,409,111 2,568,413. 4,053,258 10,936,833. include any "unusual grants.") 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the 1,701,716. 2,018,244 1,142,317. 124,510. 1,173,578. 6,160,365. organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organ-4 ization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 3,080,797 3,545,214. 2,551,428 2,692,923. 5,226,836, 17,097,198. 6 Total. Add lines 1 through 5 ..... 7a Amounts included on lines 1, 2, and 250,620 236,242 315,218, 245,808 1,047,888. 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year 0. c Add lines 7a and 7b 250,620 236,242 315,218, 245,808 1,047,888 16,049,310. Public support. (Subtract line 7c from line 6.) Section B. Total Support Calendar year (or fiscal year beginning in) 🕨 (a) 2017 (b) 2018 (c) 2019 (d) 2020 (e) 2021 (f) Total 9 Amounts from line 6 3,080,797 3,545,214 2,551,428 2,692,923 5,226,836 17,097,198. 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, 274 6,525 17,549 346 12,095, 36,789. and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 274 6,525 17,549 346 36,789. 12,095 c Add lines 10a and 10b 11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on **12** Other income. Do not include gain or loss from the sale of capital 139,800 51,085 101,764 169,271 219,556, 681,476. assets (Explain in Part VI.) 3,220,871. 3,602,824. 2,670,741. 2,862,540. 17,815,463. 5,458,487. **13** Total support. (Add lines 9, 10c, 11, and 12.) 14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► Section C. Computation of Public Support Percentage 90.09 % 15 Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f)) 15 89.38 16 Public support percentage from 2020 Schedule A, Part III, line 15 16 % Section D. Computation of Investment Income Percentage .21 Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f)) 17 % 17 .16 18 Investment income percentage from 2020 Schedule A, Part III, line 17 18 % 19a 33 1/3% support tests - 2021. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not ► X more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2020. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions Schedule A (Form 990) 2021 132023 01-04-22

13090629 131839 A208280

<sup>15</sup> 2021.06000 A NOISE WITHIN

1

Yes No

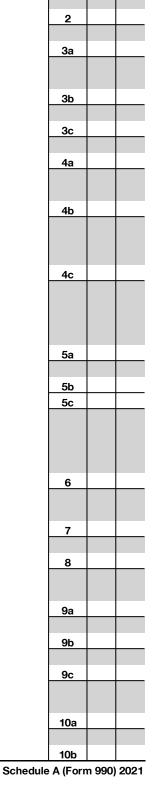
#### Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If* "Yes," *describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* **Part VI.**
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? *If* "Yes." *complete Part I of Schedule L (Form 990).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer line 10b below.*
- **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations	•		
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations		-	
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
800	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations	3		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
a L	The organization satisfied the Activities Test. <i>Complete</i> <b>line 2</b> below.			
b	The organization is the parent of each of its supported organizations. <i>Complete</i> <b>line 3</b> <i>below.</i>		,	
c	L The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a governmental entity (see in Activities Test. <b>Answer lines 2a and 2b below.</b>	struction	· ·	Ne
2			Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Voo " then in <b>Part VI identify</b>			
	the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify</b> those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
h	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,	20		
~	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in <b>Part VI.</b>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

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#### 13090629 131839 A208280

#### 2021.06000 A NOISE WITHIN

17

#### A2082801

# Schedule A (Form 990) 2021 A Noise Within Part IV Supporting Organizations (continued)

rt V Type III Non-Functionally Integrated 509(a)(3) Supporti			
Check here if the organization satisfied the Integral Part Test as a qualifyi		•	Part VI). See instructio
All other Type III non-functionally integrated supporting organizations mu	st complete s	Sections A through E.	(D) Current Veer
tion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
Net short-term capital gain	1		
Recoveries of prior-year distributions	2		
Other gross income (see instructions)	3		
Add lines 1 through 3.	4		
Depreciation and depletion	5		
Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
Other expenses (see instructions)	7		
Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
			(B) Current Year
tion B - Minimum Asset Amount		(A) Prior Year	(optional)
Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
Average monthly value of securities	1a		
Average monthly cash balances	1b		1
Fair market value of other non-exempt-use assets	1c		
I Total (add lines 1a, 1b, and 1c)	1d		
Discount claimed for blockage or other factors			
(explain in detail in <b>Part VI</b> ):			
Acquisition indebtedness applicable to non-exempt-use assets	2		
Subtract line 2 from line 1d.	3		
Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
see instructions).	4		
Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
Multiply line 5 by 0.035.	6		
Recoveries of prior-year distributions	7		
Minimum Asset Amount (add line 7 to line 6)	8		
tion C - Distributable Amount			Current Year
Adjusted net income for prior year (from Section A, line 8, column A)	1		
Enter 0.85 of line 1.	2		
Minimum asset amount for prior year (from Section B, line 8, column A)	3		
Enter greater of line 2 or line 3.	4		
Income tax imposed in prior year	5		
Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		

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Sche	dule A (Form 990) 2021 A Noise Within			95-4443878	Page 7
Par	t V Type III Non-Functionally Integrated 509(	a)(3) Supporting Orga	nizations (continued)		
Secti	on D - Distributions			Current Y	'ear
1	Amounts paid to supported organizations to accomplish exer	mpt purposes	1		
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported			
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpose	s of supported organizations	3 3		
4	Amounts paid to acquire exempt-use assets		4		
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)	5		
6	Other distributions (describe in Part VI). See instructions.		6	i	
7	Total annual distributions. Add lines 1 through 6.		7		
8	Distributions to attentive supported organizations to which the	e organization is responsive			
	(provide details in Part VI). See instructions.		8		
9	Distributable amount for 2021 from Section C, line 6		9	1	
10	Line 8 amount divided by line 9 amount		10		
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributa Amount for	
_1	Distributable amount for 2021 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2021 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2021				
a	From 2016				
b	From 2017				
C	From 2018				
d	From 2019				
e	From 2020				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years			_	
<u>h</u>	Applied to 2021 distributable amount			_	
<u>    i</u>	Carryover from 2016 not applied (see instructions)				
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2021 from Section D,				
	line 7: \$				
	Applied to underdistributions of prior years				
	Applied to 2021 distributable amount			_	
	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2021, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in <b>Part VI.</b> See instructions.				
6	Remaining underdistributions for 2021. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2022. Add lines 3j				
•	and 4c. Breakdown of line 7:				
8	Excess from 2017				
	Excess from 2017				
	Excess from 2019				
	Excess from 2020				
	Excess from 2020				
<u> </u>					

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Schedule A, Part III, Line 12, Explanation for Other Income:

Special Event Income
2017 Amount: \$ 139,800.
2018 Amount: \$ 51,085.
2019 Amount: \$ 61,020.
2020 Amount: \$ 160,555.
2021 Amount: \$ 209,373.
Other Income
2019 Amount: \$ 40,744.
2020 Amount: \$ 8,716.
2021 Amount: \$ 10,183.

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Schedule A (Form 990) 2021

## Schedule B

(Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

* *	PUBLIC	DISCLOSURE	COPY	* *
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## Schedule of Contributors

► Attach to Form 990 or Form 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2021

Employer identification number

	A Noise Within	95-4443878
Organization type (che	ck one):	
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)( <sup>3</sup> ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation	
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
	on is covered by the <b>General Rule</b> or a <b>Special Rule.</b> 11(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule	a Saa instructions
General Rule		
For an organiz	ation filing Form 990, 990-FZ, or 990-PE that received, during the year, contributions totaling	\$5,000 or more (in money or

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

#### Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year  $\dots$   $\blacktriangleright$  \$

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

	3 (Form 990) (2021)		1	Page 2
Name of or	rganization		Emplo	yer identification number
A Noise	Within		9.	5-4443878
Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	I space is needed.		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ns	(d) Type of contribution
1		\$1,073	<u>,265.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ns	(d) Type of contribution
2		\$959	<u>,950.</u>	Person     X       Payroll
(a)	(b)	(c)		(d)
<u>No.</u>	Name, address, and ZIP + 4	\$225	<u>,000.</u>	Type of contribution         Person       X         Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ns	(d) Type of contribution
4		\$118	<u>,500.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ns	(d) Type of contribution
5		\$112	<u>,500.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ns	(d) Type of contribution
		\$		Person Payroll Noncash (Complete Part II for noncash contributions.)

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	B (Form 990) (2021)		Page 3
Name of o	rganization		Employer identification number
A Noise	Within		95-4443878
Part II	Noncash Property (see instructions). Use duplicate copies of Part II if	additional space is neede	d.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimat (See instructions	
		- - - _ \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimat (See instructions	
		- - - _ \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimat (See instructions	
		- - - - - \$\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimat (See instructions	
		- - - - \$\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimat (See instructions	Data received
		- - - _ \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimat (See instructions	
		- - - \$	
123453 11-11	1-21		 Schedule B (Form 990) (2021)

lame of ore	ganization			Employer identification number
Noise W	Vithin			95-4443878
Part III	Exclusively religious, charitable, etc., contribut from any one contributor. Complete columns (a completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additional	) through (e) and the following line entricharitable, etc., contributions of \$1,000 or le	v. For organizations	
a) No. from			( ) 5	
Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
		(e) Transfer of gift		
	Transferee's name, address, a			nsferor to transferee
a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held
Part I				
Ļ		(e) Transfer of gift		
	Transferee's name, address, a			nsferor to transferee
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held
		(e) Transfer of gift		
_	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	nsferor to transferee
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held
		(e) Transfer of gift		
-	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	nsferor to transferee
3454 11-11-2	21	24		Schedule B (Form 990) (20

Department of the Treasury

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Internal Revenue Service Name of the organization

(Form	990)
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### **Supplemental Financial Statements**

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
 Attach to Form 990.
 Go to www.irs.gov/Form990 for instructions and the latest information.



Employer identification number

Par	t I Organizations Maintaining Donor Advise	d Eunde or Other	Similar Funde	or Accounts	95-4443878
Fai	organization answered "Yes" on Form 990, Part IV, lin		Similar Funus	of Accounts	
		(a) Donor advis	sed funds	(b) Funds	and other accounts
1	Total number at end of year				
2	Aggregate value of contributions to (during year)				
3	Aggregate value of grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and donor advisors in v		neld in donor advis	ed funds	
	are the organization's property, subject to the organization's				Yes No
6	Did the organization inform all grantees, donors, and donor a				
	for charitable purposes and not for the benefit of the donor o	r donor advisor, or for a	any other purpose	conferring	
	impermissible private benefit?				Yes No
Par	t II Conservation Easements. Complete if the org	ganization answered "Y	'es" on Form 990,	Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization	on (check all that apply	).		
	Preservation of land for public use (for example, recrea	tion or education)	Preservation of	f a historically imp	portant land area
	Protection of natural habitat	L	Preservation or	f a certified histor	ic structure
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contri	ibution in the form		
	day of the tax year.				ld at the End of the Tax Year
a					
b	Total acreage restricted by conservation easements				
	Number of conservation easements on a certified historic structure of conservation easements included in (a) acquired of				
a	Number of conservation easements included in (c) acquired a				
3	listed in the National Register				ing the tax
5	year	eased, extinguished, of	r terminated by the	organization du	ing the tax
4	Number of states where property subject to conservation eas	sement is located			
5	Does the organization have a written policy regarding the per	•	ction, handling of		
	violations, and enforcement of the conservation easements it	- · · ·	, <b>j</b>		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,				
	▶				
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and e	enforcing conserva	tion easements d	luring the year
	\$				
8	Does each conservation easement reported on line 2(d) abov	e satisfy the requireme	nts of section 170(	(h)(4)(B)(i)	
	and section 170(h)(4)(B)(ii)?				Yes No
9	In Part XIII, describe how the organization reports conservation	on easements in its rev	enue and expense	statement and	
	balance sheet, and include, if applicable, the text of the footn	note to the organization	's financial statem	ents that describe	es the
Dar	organization's accounting for conservation easements. t III Organizations Maintaining Collections of	Art Historical Tr	assures or Ot	hor Similar A	ccotc
Fai	Complete if the organization answered "Yes" on Form				133513.
10			wanua atatamant a	and balance above	t worko
Ia	If the organization elected, as permitted under FASB ASC 95 of art, historical treasures, or other similar assets held for put	· ·			
	service, provide in Part XIII the text of the footnote to its finar			-	
h	If the organization elected, as permitted under FASB ASC 95				rks of
	art, historical treasures, or other similar assets held for public	•			
	provide the following amounts relating to these items:	, orangenerit, orangenerit,			
	(i) Revenue included on Form 990, Part VIII, line 1			▶ \$	
2	If the organization received or held works of art, historical treater				
	the following amounts required to be reported under FASB A				
а	Revenue included on Form 990, Part VIII, line 1	-		🕨 \$_	
b	Assets included in Form 990, Part X				
LHA	For Paperwork Reduction Act Notice, see the Instructions	s for Form 990.		Sc	hedule D (Form 990) 2021
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Sche	dule D (Form 990) 2021 A Noise Wit							95-444			age <b>2</b>
Par	t III Organizations Maintaining C	ollections of Ar	t, Histori	cal Tre	asures, oi	<sup>r</sup> Other	<sup>-</sup> Similar	<sup>-</sup> Assets	(contir	nued)	
3	Using the organization's acquisition, accessi	on, and other record	s, check an	y of the f	ollowing that	make si	gnificant u	ise of its			
	collection items (check all that apply):										
а	Public exhibition	d	I 🗌 Loa	an or excl	nange progra	m					
b	Scholarly research	е	e 🗌 Otł	ner							
с	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explair	how they	further th	e organizatio	n's exen	npt purpos	se in Part	XIII.		
5	During the year, did the organization solicit of	or receive donations of	of art, histor	rical treas	ures, or othe	r similar	assets				
	to be sold to raise funds rather than to be ma								Yes		No
Par	t IV Escrow and Custodial Arran reported an amount on Form 990, Pa		ete if the or	ganizatio	n answered "	Yes" on	Form 990	, Part IV, I	ine 9, or		
1a	Is the organization an agent, trustee, custod	ian or other intermed	iary for con	tributions	or other ass	ets not i	ncluded				
	on Form 990, Part X?								Yes		No
b	If "Yes," explain the arrangement in Part XIII										
		·	U U						Amoun	t	
с	Beginning balance						1c				
d	Additions during the year						1d				
	Distributions during the year										
f	Ending balance						1f				
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for esc	row or cu	stodial acco	unt liabili	ty?		Yes		No
	If "Yes," explain the arrangement in Part XIII.										
Par	<b>t V</b> Endowment Funds. Complete		swered "Ye	es" on Fo							
		(a) Current year	(b) Prior	r year	(c) Two year	's back	(d) Three y	ears back	(e) Four	years	back
1a	Beginning of year balance										
b	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curr	•		olumn (a)	) held as:						
а	Board designated or quasi-endowment		_%								
b	Permanent endowment										
с		%									
-	The percentages on lines 2a, 2b, and 2c sho	•									
3a	Are there endowment funds not in the posse	ession of the organiza	ition that ar	e held an	d administer	ed for th	e organiza	ation	ſ	Yes	No
	by:									165	NU
	(i) Unrelated organizations								3a(i)		
L	(ii) Related organizations								3a(ii) 3b		
4	Describe in Part XIII the intended uses of the										
Par	t VI Land, Buildings, and Equipm			15.							
	Complete if the organization answere		). Part IV. lir	ne 11a. S	ee Form 990	Part X	line 10.				
	Description of property	(a) Cost or o		(b) Cost			ccumulate	h	(d) Boo	ساد ۷	<u> </u>
	Description of property	basis (investr		basis		• •	oreciation		( <b>u</b> ) 000	n value	5
19	Land	· · ·	,		,013,000.				2	013,	000.
	Buildings				,308,127.		2,705,	191.		602,	
	Leasehold improvements				651,538.		232,		· ,	419,	
	Equipment				480,515.		361,			119,	
	Other				25,000.		25,			,	0.
	. Add lines 1a through 1e. (Column (d) must e		X column (	B) line 11			- 1		10	154,	
		quari uni 330, Fall		ו שווו ,ע	<i></i>					/	

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(a) Description of security or category (including name of security)	(b) Book value	1b. See Form 990, Part X, line 12. (c) Method of valuation: Cost or end-of-year market value
4) Einen die Labertinen		
2) Closely held equity interests		
3) Other		
(A) Investments	2,104,473.	Cost
(B)	, ,	
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	2,104,473.	
Part VIII Investments - Program Related.	, , <sub>1</sub>	
Complete if the organization answered "Yes" or	n Form 990, Part IV, line 1	1c. See Form 990, Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		
Part IX Other Assets.		
Complete if the organization answered "Yes" or	n Form 990, Part IV, line 1	1d. See Form 990, Part X, line 15.
(a) D	escription	(b) Book value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(6) (7)		
(7)		
(7) (8)		
(7) (8) (9)	15)	
(7) (8) (9) fotal. (Column (b) must equal Form 990, Part X, col. (B) line 3	15.)	
(7) (8) (9) fotal. (Column (b) must equal Form 990, Part X, col. (B) line 3		
(7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line T Part X Other Liabilities. Complete if the organization answered "Yes" or (a) Pare information of the bill		
(7) (8) (9) otal. (Column (b) must equal Form 990, Part X, col. (B) line T Part X Other Liabilities. Complete if the organization answered "Yes" or (a) Pare information of the bill		1e or 11f. See Form 990, Part X, line 25.
(7) (8) (9) otal. (Column (b) must equal Form 990, Part X, col. (B) line : Part X Other Liabilities. Complete if the organization answered "Yes" or . (a) Description of liability		1e or 11f. See Form 990, Part X, line 25.
(7) (8) (9) fotal. (Column (b) must equal Form 990, Part X, col. (B) line 7 Part X Other Liabilities. Complete if the organization answered "Yes" or . (a) Description of liability (1) Federal income taxes		1e or 11f. See Form 990, Part X, line 25. (b) Book value
(7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line T Part X Other Liabilities. Complete if the organization answered "Yes" or . (a) Description of liability (1) Federal income taxes (2) Deferred Compensation Liability		1e or 11f. See Form 990, Part X, line 25. (b) Book value
(7) (8) (9) otal. (Column (b) must equal Form 990, Part X, col. (B) line : Part X Other Liabilities. Complete if the organization answered "Yes" or . (a) Description of liability (1) Federal income taxes (2) Deferred Compensation Liability (3)		1e or 11f. See Form 990, Part X, line 25. (b) Book value
(7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line : Part X Other Liabilities. Complete if the organization answered "Yes" or . (a) Description of liability (1) Federal income taxes (2) Deferred Compensation Liability (3) (4)		1e or 11f. See Form 990, Part X, line 25. (b) Book value
(7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 7 Part X Other Liabilities. Complete if the organization answered "Yes" or . (a) Description of liability (1) Federal income taxes (2) Deferred Compensation Liability (3) (4) (5) (6)		1e or 11f. See Form 990, Part X, line 25. (b) Book value
(7) (8) (9) fotal. (Column (b) must equal Form 990, Part X, col. (B) line 7 Part X Other Liabilities. Complete if the organization answered "Yes" or (a) Description of liability (1) Federal income taxes (2) Deferred Compensation Liability (3) (4) (5) (6) (7)		1e or 11f. See Form 990, Part X, line 25. (b) Book value
(7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 7 Part X Other Liabilities. Complete if the organization answered "Yes" or Complete if the organization answered "Yes" or (a) Description of liability (1) Federal income taxes (2) Deferred Compensation Liability (3) (4) (5) (6)		1e or 11f. See Form 990, Part X, line 25. (b) Book value

2. Liability for uncertain tax positions. In Part XIII, provide the text of the foothote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the foothote has been provided in Part XIII ... X

Schedule D (Form 990) 2021

132053 10-28-21

Sch	edule D (Form 990) 2021 A Noise Within			95-4443878	Page <b>4</b>
Pa	rt XI Reconciliation of Revenue per Audited Financial State	ements With R	evenue per Ret	urn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line	12a.			
1	Total revenue, gains, and other support per audited financial statements			1	5,352,855.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	-105,632.		
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	-105,632.
3	Subtract line <b>2e</b> from line <b>1</b>			3	5,458,487.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
с	Add lines <b>4a</b> and <b>4b</b>			4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)			5	5,458,487.
Pa	rt XII Reconciliation of Expenses per Audited Financial Stat	ements With E	Expenses per R	eturn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line	12a.			
1	Total expenses and losses per audited financial statements			1	3,851,050.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b					
с					
d	Other (Describe in Part XIII.)				
е	Add lines <b>2a</b> through <b>2d</b>			2e	0.
3	Subtract line <b>2e</b> from line <b>1</b>			3	3,851,050.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
	Other (Describe in Part XIII.)				
	Add lines 4a and 4b			4c	Ο.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.			5	3,851,050.
Pa	rt XIII Supplemental Information.	<i>;</i>			
Prov	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4;	Part IV. lines 1b ar	nd 2b: Part V. line 4:	Part X. line 2: F	Part XI.
	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any			,	,
Par	z X, Line 2:				
The	Organization is a nonprofit, tax-exempt organization as de	scribed in			
Sec	tion 501(c)(3) of the Internal Revenue Code (the Code) and	is exempt			
		-			
fro	n federal income and state franchise taxes on related incom	e pursuant			
to	Section 501(a) of the Code and similar provisions of the Ca	lifornia			
Fra	nchise Tax Code. The Organization does not engage in any si	gnificant			
<u> </u>	tenibe lak code. The organization does not engage in any br	ghirieane			
unr	alated trades or husinesses Accordingly no provision for	income taxes			
u111	elated trades or businesses. Accordingly, no provision for	Income cares			
ic -	required				
<u>тв</u> :	required.				
11 0	. GAAP provide accounting and disclosure guidance about pos	itions taken			
0.5	, SAME Provide accounting and discrosure guidance about pos	LETOID CAVEI			

by an organization in its tax returns that might be uncertain. Management

has considered its tax positions and believes all of the positions taken

by the Organization are more likely than not to be sustained upon

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Schedule D (Form 990) 2021

	(Form 990) 2021			Within
Part XIII	Supplemental Info	orma	tion <sub>(c</sub>	ontinued)

e Within

examination.

Schedule D (Form 990) 2021

132055 10-28-21

SCHEDULE G	Suppleme	ntal Information Regarding	Fund	Iraisi	ing or Gaming A	ctiv	ities	OMB No. 1545-0047
(Form 990)	Complete if the	or if the	2021					
Department of the Treasury		organization entered more than \$15 Attach to Form 990	-		-			Open to Public
Internal Revenue Service	► Go	to www.irs.gov/Form990 for instr	uction	s and	the latest informati	on.		Inspection
Name of the organization	n A Noise Wit	thin					Employer id 95-44438	entification number 78
	complete this part	Complete if the organization answe	ered "Y	es" or	n Form 990, Part IV, I	ine 1	7. Form 990-E	Z filers are not
<ol> <li>Indicate whether th         <ul> <li>a Mail solicitat</li> <li>b Internet and</li> <li>c Phone solici</li> <li>d In-person so</li> </ul> </li> <li>2 a Did the organization key employees list</li> </ol>	e organization rais tions email solicitations tations licitations on have a written c red in Form 990, P ) highest paid indiv	ed funds through any of the followin e Solicita f Solicita g Special or oral agreement with any individual art VII) or entity in connection with p viduals or entities (fundraisers) pursu	tion of tion of fundra (incluc rofessi	non-g gover aising ling of onal fu	overnment grants nment grants events ficers, directors, trus undraising services?	-	Ye	
(i) Name and addres or entity (fund	s of individual	(ii) Activity	fundr have c	ustody itrol of	(iv) Gross receipts from activity	tò (e	Amount paid or retained by) fundraiser ted in col. <b>(i)</b>	(vi) Amount paid to (or retained by) organization
			Yes	No				
	ich the organizatio	n is registered or licensed to solicit o	contrib	► utions	or has been notified	it is	exempt from re	egistration
or licensing.								
LHA For Paperwork R	eduction Act Noti	ice, see the Instructions for Form 9	990 or	990-E	Ζ.		Schedul	e G (Form 990) 2021

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A Noise Within

95-4443878 Page **2** 

**Part II** Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		or fundraising event contributions and gro	(a) Event #1	(b) Event #2	(c) Other events None	(d) Total events (add col. (a) through
			(event type)	(event type)	(total number)	– col. <b>(c)</b> )
Revenue	1	Gross receipts	278,266.			278,266.
	2	Less: Contributions				
	3	Gross income (line 1 minus line 2)	278,266.			278,266.
	4	Cash prizes				
s	5	Noncash prizes	1,397.			1,397.
ense	6	Rent/facility costs	26,803.			26,803.
Direct Expenses	7	Food and beverages	31,431.			31,431.
	8	Entertainment				
	9	Other direct expenses	9,262.			9,262.
	10	Direct expense summary. Add lines 4 through	( )		►	68,893.
Do		Net income summary. Subtract line 10 from lin				209,373.
Pa	I	<b>Gaming.</b> Complete if the organization a \$15,000 on Form 990-EZ, line 6a.	answered "Yes" on Form	990, Part IV, line 19, or i	reported more than	
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Reve	1	Gross revenue				

ses	2	Cash prizes										
xpens	3	Noncash prizes										
Direct Expenses	4	Rent/facility costs										
	5	Other direct expenses										
	6	Volunteer labor		☐ Yes % ] No		Yes No	_ %		Yes No	%		
	7 8	Direct expense summary. Add lines 2 through Net gaming income summary. Subtract line 7										
	ls t	ter the state(s) in which the organization condu he organization licensed to conduct gaming ac No," explain:	tivitie	es in each of these	state	s?					Yes	No
		ere any of the organization's gaming licenses re Yes," explain:				ated during the t	tax y	ear?			Yes	No

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Schedule G (Form 990) 2021

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Sch	edule G (Form 990) 2021	A Noise Within		95-4	443878	Page 3
			ers?		Yes	No
	Is the organization a grantor, ber	eficiary or trustee of a trust, or a	a member of a partnership or other entity formed			
					Yes	No No
	Indicate the percentage of gamin				11	
					13a	<u>%</u>
			anization's gaming/special events books and reco		13b	%
14	Enter the hame and address of th	e person who prepares the orga	anization's gaming/special events books and reco	rus.		
	Name 🕨					
	Address 🕨					
15a	Does the organization have a con	tract with a third party from whe	om the organization receives gaming revenue?		Yes	🗌 No
b	If "Yes," enter the amount of gan	ning revenue received by the orc	ganization $\blacktriangleright$ \$ and the am	nount		
	of gaming revenue retained by th					
c	If "Yes," enter name and address	of the third party:				
	Name 🕨					
	Address ►					
40						
16	Gaming manager information:					
	Name					
	Gaming manager compensation	▶ \$				
	Description of services provided	▶				
	Diverter /affiner					
	Director/officer	Employee	Independent contractor			
17	Mandatory distributions:					
	•	r state law to make charitable d	istributions from the gaming proceeds to			
-	retain the state gaming license?		······································		Yes	No No
b			distributed to other exempt organizations or spent			
	organization's own exempt activi					
Pa	rt IV Supplemental Info	mation. Provide the explanat	tions required by Part I, line 2b, columns (iii) and (v	); and Pa	rt III, lines 9,	9b, 10b,
	15b, 15c, 16, and 17b, a	s applicable. Also provide any a	dditional information. See instructions.			
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	Calcaduda O (Farma 000)

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SCHEDULE O	Supplemental Information to Form 990 or 990	-EZ	OMB No. 1545-0047
(Form 990)	Complete to provide information for responses to specific questions on		2021
Department of the Treesury	Form 990 or 990-EZ or to provide any additional information.  Attach to Form 990 or Form 990-EZ.		Open to Public
Department of the Treasury Internal Revenue Service	Go to www.irs.gov/Form990 for the latest information.		Inspection
Name of the organization			identification number
	A Noise Within	95-44	43878
Form 990, Part I,	Line 1, Description of Organization Mission:		
by embracing unive	rsal human experiences, expanding personal awareness,		
and challenging in	dividual perspectives. Our company of resident and		
guest artists perf	orming in rotating repertory immerses student and		
general audiences	in timeless, epic stories in an intimate setting.		
Form 990 Part III	, Line 4a, Program Service Accomplishments:		
	,, ,, , ,, , , , , , , , , , , , , , , , , , , ,		
Form 990 Part III	, Line 4b, Program Service Accomplishments:		
	,,,,,,,,		
and availability,	schools receive flexible scholarships that can be		
used on tickets t	ransportation, and/or program fees.		
used on cickets, c	Tansportation, and/or program rees.		
b. STUDY GUIDES			
Free, comprehensiv	e study guides are available to educators via ANW's		
website, designed	to help teachers bring plays and classic text to life		
in a classroom set	ting. Activities integrate analysis of themes,		
	· · · · · · · · · · · · · · · · · · ·		
context, and chara	cters with music, visual arts, and history, all		
aligned with Calif	ornia State standards.		
ר PROFFCCTONNT היה	VELODMENT		
c. PROFESSIONAL DE	A PRATURAT		
ANW offers two fre	e professional development opportunities for teachers		
LHA For Paperwork R	eduction Act Notice, see the Instructions for Form 990 or 990-EZ.	Scheo	dule O (Form 990) 2021
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Name of the organization A Noise Within	Employer identification number 95-4443878
each year. Our late summer seminar, the Educator Extravaganza, previews	
our upcoming season and includes workshops led by professional teaching	
artists. The second seminar takes place in the spring and typically	
centers on our annual Shakespeare production. During the pandemic,	
these activities happened virtually.	
d. WORKSHOPS & RESIDENCIES	
Professional teaching artists conduct hands-on exercises and	
interactive analysis, allowing students to connect with the play's	
language and gain a deeper understanding of its universal themes.	
In-class workshops are one-day intensive courses; residencies are often	
eight-week engagements where teaching artists conduct one or two	
classes per week. Programs are tailored in terms of length, scale, and	
location to the individual needs of the school or class, and can take	
place virtually or through hybrid formats as needed or requested by our	
school partners.	
e. SUMMER WITH SHAKESPEARE	
A five-week theatre camp for students 6-18, Summer With Shakespeare	
gives students the opportunity to work with professional actors and	
technicians, gaining an appreciation of Shakespeare's verse as well as	
a unique exposure to a variety of classic plays. Designed to challenge	
young artists to be scholars and performers of The Bard, this program	
enhances acting and public speaking skills, builds self-confidence, and	
i	
offers invaluable experience in the crafts of the theatre.	
f. RELAXED PERFORMANCES	

ANW's sensory-friendly ""Relaxed Performances"" are designed for

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Schedule O (Form 990) 2021

Name of the organization	Employer identification number
A Noise Within	95-4443878
patrons with Autism and other Disorders of Social Interaction and	
Communication. These performances maintain the recognized excellence	
that is a hallmark for ANW and are delivered by the same professional	
cast while employing reduced lighting, sound, and a sensory friendly	
environment. We are committed to bringing the magic of live theatre to	
all members of our community and have been invited to consult with the	
atural History Museum, The California Science Center, and The	
Juntington Library and Gardens on methodology to introduce guests to	
ensory-friendly experiences."	
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Schedule O (Form 990) 2021 Name of the organization	Page 2 Employer identification number
A Noise Within	95-4443878
Barn 000 Dant III Ling As Descence Ganuics Assemblishments	
Form 990, Part III, Line 4c, Program Service Accomplishments:	
subscriber season audiences. Another aspect of our accessible	
programming is our Resident Artist Reading series, which offers staged	
readings of seldom-performed classical plays to the general public at	
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Schedule O (Form 990) 2021	Page <b>2</b>
Name of the organization A Noise Within	Employer identification number 95-4443878
no admission cost."	
Form 990, Part VI, Section A, line 2:	
Two directors, Geoff Elliott and Julia Rodriguez-Elliott, are married.	
Form 990 Dort VI Costion P line 11b.	
Form 990, Part VI, Section B, line 11b:	
The Form 990 is prepared by the organization's outside public accounting	
firm based on information provided by management. Once a draft of the	
return is available, it is reviewed by the managing director and finance	
manager with any changes or revisions incorporated into the filing. Finally	
it is reviewed by the Board of Directors prior to filing.	
Form 990, Part VI, Section B, Line 12c:	
A Noise Within (ANW) has a written conflict of interest policy in place for	
members of the board of directors or officers. The conflict of interest	
policy defines circumstances that shall be deemed to create conflicts of	
interest. Before board or committee action on a Contract or Transaction	
involving a Conflict of Interest, a director or committee member having a	
Conflict of Interest and who is in attendance at the meeting shall disclose	Schedule O (Form 990) 2021

Name of the organization	Employer identification number
A Noise Within	95-4443878
all facts material to the Conflict of Interest. Such disclosure shall be	
reflected in the minutes of the meeting. A person who has a Conflict of	
Interest shall not participate in or be permitted to hear the board's or	
committee's discussion of the matter except to disclose material facts and	
to respond to questions. The conflict of interest policy shall be reviewed	
annually by each member of the board of directors.	
Form 990, Part VI, Section B, Line 15:	
The Board of Directors reviews and approves compensation for top	
management.	
Form 990, Part VI, Section C, Line 19:	
The Organization's Audited Financial Statements are available at both the	
Organization's website and the California Dept. of Justice - Charity	
Registry. The other documents described in this request were not made	
available to the public.	
Form 990, Part XII, Line 2c:	
The process has not changed from the prior year.	

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